State of South Dakota **Statement of Financial Interest Candidate for Public Office**

MAR 12 100

S.D. SEC. OF STATE File statement in the office where your nominating petition or convention nomination certification was filed.

Please read information on reverse side before completing this form.	
1. Name Martha Marie	lander linde
2. Address 320 No. We	stern #2
3. Office Sought State Represen	tative - District 15
4. What is your occupation/profession?	.•
5. List any enterprise which accounted for more than ten percent of, or contributed more than \$2,000 to, your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. Identify who receives the income from each enterprise. **Eldercure** for father* **Robert** Vandov/'nice**	What is the nature of your immediate family's association with each? The value of the financial interest need not be reported. Paud o Martha VAMPELINDE for PoA WORK
6. List any enterprise in which you, your spouse or minor children living at home control more than ten percent of the capital or stock. Identify who has the ownership interest in each enterprise. 320 W. Destern #2 817 S. Halt - Pental	What is the nature of your immediate family's association with each? Owner - Martha Canderling Owner - Christops (Ausband) Filed this 12th day of
State of South Dakota) County of	Verification Verification Verification Verification
I have reviewed paragraphs 1 through 6 of the Information Regard Statement of Financial Interest and certify that the information remains the information remains and certify that the information remains financial interests for the preceding calendar year. (Signed Aday of Manual Control of Sworn to before me this day of Manual Control of Sworn to before me this day of Manual Control of Sworn to before me this day of Manual Control of Sworn to before me this day of Manual Control of Sworn to before me this day of Manual Control of Sworn to before me this day of Manual Control of Sworn to before me this day of Manual Control of Sworn to before me this day of Manual Control of Sworn to before me this day of Manual Control of Sworn to before me this day of Manual Control of Sworn to before me this day of Manual Control of Sworn to before me this day of Manual Control of Sworn to before me this day of Manual Control of Sworn to be so the sworn to be so the sworn to be so the sworn to be so that the sworn to be sworn to be so the sworn to be sworn to b	arding Statement of Financial SHORIST CANADA STATES eported is a complete, true and accurate representation of Any har fame and sulful and sul
(Seal)	Officer Administering Oath
Revised,1997	My commission expires:
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